DLN: 93493270005081

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

A Fo	r the 2	2010 ca	lendar year, or tax year beginning 01-01-2010 and ending 12-31-2010		D 51		1-16-1
B Ch	eck if ap	pplicable	C Name of organization NATIONAL RIFLE ASSOCIATION OF AMERICA		D Emplo	oyer i	dentification number
	ress ch	_	Doing Business As		53-0	1161	130
☐ Nai	me char	nge	boling business his		E Teleph	none	number
_	ial retur minated		Number and street (or P O box if mail is not delivered to street address) 11250 WAPLES MILL ROAD	Room/suite	(703)	267	7-1000
	ended r		City or town, ctate or country, and 7TD 4		G Gross	receip	ts \$ 253,051,952
		pending	City or town, state or country, and ZIP + 4 FAIRFAX, VA 220307400				. , ,
			F Name and address of principal officer	H(a) is this a	roup return f	or affili	ates? Yes No
			WILSON H PHILLIPS JR	···(···) Is tills a ç	group recurri	Or allill	ates / Tes / NO
			11250 WAPLES MILL RD FAIRFAX,VA 22030	H(b) Are all a	iffiliates inc	luded	7
							(see instructions)
I Ta	x-exem	pt status	「 501(c)(3)	H(c) Group	exemptı	on n	umber 🟲
			v nra org				
			Corporation Trust Association Other ►	L Year of form	nation 190)5 I	M State of legal domicile VA
Pa	rt I		mary escribe the organization's mission or most significant activities				
Governance	C E	AND PRO CONSTI ENFORC	AL DEFENSE, TO TRAIN LAW ENFORCEMENT AGENCIES, TO TRAIN DMOTE THE SHOOTING SPORTS, TO PROMOTE HUNTER SAFETY TO TUTION TO PROMOTE PUBLIC SAFETY, LAW AND ORDER, AND THE EMENT AGENCIES TO TRAIN CIVILIANS IN MARKSMANSHIP TO FO	O PROTECT NATIONAL	AND DE DEFENS	FEN E TC	D THE U S D TRAIN LAW
	2 6	heck th	us box ► fithe organization discontinued its operations or disposed of n	nore than 25	% of its	net a	ussets.
Activities &			of voting members of the governing body (Part VI, line 1a)	nore than 25	1	3	76
乭			of independent voting members of the governing body (Part VI, line 1a)			4	70
Act			mber of individuals employed in calendar year 2010 (Part V, line 2a)			5	781
-			mber of volunteers (estimate if necessary)			6	125,000
			related business revenue from Part VIII, column (C), line 12			7a	22,545,060
			lated business taxable income from Form 990-T, line 34			7b	-480,264
				Prior	Year		Current Year
	8	Contril	butions and grants (Part VIII, line 1h)	19	90,620,1	82	71,145,801
≅	9	Progra	m service revenue (Part VIII, line 2g)	5,753		81	107,083,801
Revenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		-131,0	48	3,460,273
æ	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,	41,301,9	89	46,121,404
	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line	2:	37,544,5	04	227,811,279
	13	Grants	and similar amounts paid (Part IX, column (A), lines 1-3)		312,5	00	219,500
	14	Benefit	ts paid to or for members (Part IX, column (A), line 4)				0
\$	15	Salarie 10)	es, other compensation, employee benefits (Part IX, column (A), lines 5-	!	51,967,6	45	51,666,650
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)		7,116,0	19	7,989,955
ਡੌ	ь	Total fu	ndraising expenses (Part IX, column (D), line 25) ▶33,912,021				
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1	76,964,8	17	183,658,170
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2:	36,360,9	81	243,534,275
	19	Reveni	ue less expenses Subtract line 18 from line 12		1,183,5	-	-15,722,996
5 S				Beginning Ye		nt	End of Year
Set Ses	20	Total ~	assets (Part X, line 16)		50,315,3	64	163,781,200
Not Assets or Fund Balances	21		iabilities (Part X, line 26)		22,740,0	-	139,630,906
E E	22		sets or fund balances Subtract line 21 from line 20		37,575,3	-	24,150,294
Par			ature Block		- , , - , - , -		
Unde	r penal	ties of pe	ature Block erjury, I declare that I have examined this return, including accompanying sche f, it is true, correct, and complete. Declaration of preparer (other than officer) i	s based on al	l informat		
Sign		Signa	ture of officer	201 Dat	1-09-26 e		
Here		'	ON H PHILLIPS JR TREASURER AND CHIEF FINANCIAL OFFIC				
			or print name and title				
	Ī	Print/Type			heck if self		PTIN
Paid		preparer's	TAMES D SWEENEY		mployed 🕨		
Prepa	aror		Firm's EIN				
Use (Firm's add	dress • 8000 TOWERS CRESCENT DR STE 500				Phone no (703) 336-6400
		S discus	VIENNA, VA 22184 s this return with the preparer shown above? (see instructions)				6400 ▼ Yes

Par		1ent of Program Serv Schedule O contains a res			ı	٦
1	Briefly describe	e the organization's missior	1			
<u>TO F</u>	ROTECT AND D	EFEND THE U S CONSTI	TUTION			
2		ation undertake any signific 990 or 990-EZ?				
	If "Yes," descril	be these new services on S	chedule O			
3	_	ation cease conducting, or	-	-	onducts, any program	
	If "Yes," descril	be these changes on Sched	ule O			
4	Section 501(c)	empt purpose achievemen (3) and 501(c)(4) organiza thers, the total expenses, a	ions and secti	on 4947(a)(1) trusts	are required to report th	
4a	(Code) (Expenses \$	38,859,989	ıncludıng grants of \$	39,500) (Reven	ue \$ 18,297,536)
	INFORM AND INS RIGHTS NRA COI SPORTS ALSO INC	TRUCT THE MEMBERSHIP AND GI	ENERAL PUBLIC OF ADER IN FIREARMS ND SHOOTING CAM	80 MILLION GUNOWNERS EDUCATION AND SAFETY 1PS TO BUILD AND FOSTE	S WITH REGARD TO THEIR IN Y NRA OUTREACH FOR YOUT R THE NEXT GENERATIONS IN	H IN THE HUNTING AND SHOOTING AMERICA VISIT NRA ORG AND
	(Code) (Expenses \$	36,029,923	including grants of \$) (Reven	ue \$ 22,428,263)
	ARTICLES ON FIR		ND LEGAL ACTION	FROM RECOGNIZED LEAD	DERS ALL NRA MEDIA VEHICL	ITAINING THE MOST AUTHORITATIVE ES SERVE TO EDUCATE AND INFORM ON APUBLICATIONS ORG
	(Code) (Expenses \$	21,288,446	including grants of \$	180,000) (Reven	nue \$
	AMENDMENT, FIG LEGISLATIVE ACT		REDUCING VIOLEN , REGULATIONS AN	T CRIME, AND PROMOTES ND LAWS, RANGE PROTEC	S HUNTERS RIGHTS AND CON TION, INTERNATIONAL GUN C	
4d	Other program	n services (Describe in Sch	nedule O)			
	(Expenses \$	88,852,887 ind	luding grants o	of\$) (Revenue \$	100,990,554)
4e	Total program	service expenses►\$	185,031,24	5		
			· ·			

Dart TV	Chackli	et of Do	auired	Schedules
2 11 4 1 4	CHECKII	st or ke	aurea	Scheaules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 💋 🔒 .	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV \cdot	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines $24b-24d$ and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section $512(b)(13)^{7}$	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 \checkmark Yes \checkmark No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 872			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2D	Yes	
la	Did the organization have unrelated business gross income of \$1,000 or more during the			
_	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь				
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N (
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N (
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ia	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes	
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b	Yes	
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	Sponsoring organizations maintaining donor advised funds.	•		
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
.1	Section 501(c)(12) organizations. Enter Greek upone from members or chareholders			
	Gross income from members or shareholders			
ט	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	ın which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Vac " has it filed a Form 730 to report these payments? If "No " provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any questi	n ın thıs Part VI
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Se	ction A. Governing Body and Management					
			Yes	No		
_						
1a	Enter the number of voting members of the governing body at the end of the tax year					
ь	Enter the number of voting members included in line 1a, above, who are					
	ındependent					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No		
6	Does the organization have members or stockholders?	6	Yes			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the					
	governing body?	7a	Yes			
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
b	Each committee with authority to act on behalf of the governing body?	8b	Yes			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No		
	ction B. Policies (This Section B requests information about policies not required by the Internal					
<u></u>	venue Code.)		Yes	No		
102	Does the organization have local chapters, branches, or affiliates?	10a	165	No		
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		110		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b				
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes			
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes			
13	Does the organization have a written whistleblower policy?	13	Yes			
14	Does the organization have a written document retention and destruction policy?	14	Yes			
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official	15a	Yes			
b	Other officers or key employees of the organization	15b	Yes			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No		
b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the					
	organization's exempt status with respect to such arrangements?	16b				
Se	ction C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed ► VA , UT , PA , OK , NY , KY , DC , CA , A	\ L				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)					

- (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 NATIONAL RIFLE ASSOCIATION OF AMERI 11250 WAPLES MILL ROAD

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee "
- ◆ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	che		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) WAYNE LAPIERRE EXEC VP	57 00			х				835,469	0	125,615
(2) CHRIS W COX EXEC DIR, ILA	57 00			х				588,412	0	70,796
(3) WILSON H PHILLIPS JR TREASURER	52 00			х				519,338	0	124,168
(4) KAYNE B ROBINSON EXEC DIR, GENERAL OPERATIONS	50 00			х				1,027,217	0	45,056
(5) EDWARD J LAND JR SECRETARY	50 00			х				412,527	0	45,832
(6) RONALD L SCHMEITS PRESIDENT	20 00	Х		х				0	0	0
(7) DAVID A KEENE 1ST VICE PRESIDENT	20 00	Х		х				0	0	0
(8) JAMES W PORTER II 2ND VICE PRESIDENT	20 00	Х		х				0	0	0
(9) TYLER SCHROPP EXEC DIRECTOR, ADVANCEMENT	52 00					х		442,476	0	54,463
(10) MARY CORRIGAN CHIEF OF STAFF	40 00					Х		329,168	0	30,373
(11) JOSEPH GRAHAM DIRECTOR, PUBLICATIONS	40 00					х		352,474	0	40,832
(12) MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					Х		345,102	0	49,348
(13) ROBERT MARCARIO DIRECTOR, MEMBERSHIP	40 00					Х		250,757	0	44,773
(14) JOE M ALLBAUGH DIRECTOR	1 00	Х						0	0	0
(15) WILLIAM H ALLEN DIRECTOR	1 00	Х						0	0	0
(16) THOMAS P ARVAS DIRECTOR	1 00	Х						0	0	0

Form 990 (2010)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other				
	per week (describe hours for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(17) SCOTT L BACH DIRECTOR	1 00	х						0	0	
(18) WILLIAM A BACHENBERG DIRECTOR (19) FE BACHHUBER JR	1 00	x						0	0	
DIRECTOR (20) M CAROL BAMBERRY DIRECTOR (21) BOB BARR	1 00	х						0	0	
DIRECTOR 22) RONNIE G BARRETT DIRECTOR	1 00	×						0	0	
23) CLEL BAUDLER DIRECTOR 24) DAVID E BENNETT III	1 00	X X						0	0	
DIRECTOR 25) J KENNETH BLACKWELL DIRECTOR	1 00	×						0	0	
26) MATT BLUNT DIRECTOR 27) DAN BOREN	1 00	x						0	0	
DIRECTOR 28) ROBERT K BROWN DIRECTOR 29) PETE BROWNELL	1 00	х						0	0	
29) PETE BROWNELL SIRECTOR 30) JOHN P BURTT SIRECTOR	1 00	X						0	0	
31) DAVID BUTZ DIRECTOR 32) J WILLIAM CARTER	1 00	х						151,033	0	
33) RICHARD CHILDRESS JIRECTOR	1 00	X						0	0	
34) PATRICIA A CLARK DIRECTOR 35) ALLAN D CORS	1 00	х						0	0	
JIRÉCTOR 36) CHARLES L COTTON JIRECTOR	1 00	X						0	0	
37) DAVID G COY IRECTOR 38) LARRY E CRAIG	1 00	X						0	0	
IRECTOR 39) JOHN L CUSHMAN IRECTOR	1 00	X						0	0	
40) WILLIAM H DAILEY DIRECTOR 41) JOSEPH P DEBERGALIS JR	1 00	x						0	0	
VIRECTOR 42) DONN C DIBIASIO VIRECTOR	1 00	х						0	0	
43) MANUEL FERNANDEZ DIRECTOR 44) EDIE P FLEEMAN DIRECTOR	1 00	X						0	0	
45) JOEL FRIEDMAN NRECTOR 46) SANDRA S FROMAN	1 00	х						0	0	
47) TOM GAINES IRECTOR	1 00	X						45,180	0	
48) JAMES S GILMORE III IRECTOR 49) MARION P HAMMER	1 00	X						0	0	
IRECTOR 50) GRAHAM HILL IRECTOR	1 00	x						190,000	0	
51) STEVE HORNADY IRECTOR 52) SUSAN HOWARD	1 00	X						0	0	
VIRECTOR 53) ROY INNIS VIRECTOR	1 00	X						0	0	
54) H JOAQUIN JACKSON IRECTOR 55) CURTIS S JENKINS	1 00	X						0	0	
NIRECTOR 56) D CYNTHIA JULIEN NIRECTOR 57) TOM KING	1 00	Х						0	0	
DIRECTOR 58) HERBERT A LANFORD JR DIRECTOR	1 00	X						0	0	
59) KARL A MALONE IRECTOR 50) CAROLYN D MEADOWS IRECTOR	1 00	X						0	0	
61) JOHN F MILIUS NRECTOR 62) BILL MILLER	1 00	X						0	0	
DIRECTOR 63) OWEN P MILLS DIRECTOR	1 00	X						0	0	
64) CLETA MITCHELL IRECTOR 65) GROVER G NORQUIST	1 00	x						0	0	
IRECTOR 66) OLIVER L NORTH IRECTOR	1 00	x						0	0	
67) JOHNNY NUGENT DIRECTOR 68) TED NUGENT DIRECTOR	1 00	x						0	0	
59) LANCE OLSEN IRECTOR 70) TIMOTHY W PAWOL	1 00	х						90,000	0	
70) FIMOLITY W PAWOL IRECTOR IRECTOR	1 00	X						0	0	
72) TODD J RATHNER IRECTOR 73) WAYNE ANTHONY ROSS	1 00	х						0	0	
IRÉCTOR 74) CARL T ROWAN JR IRECTOR	1 00	X						0	0	
75) DON SABA IRECTOR 76) ROBERT E SANDERS	1 00	X						0	0	
NIRECTOR 77) STEVEN C SCHREINER NIRECTOR	1 00	x						0	0	
78) HAROLD W SCHROEDER JIRECTOR 79) TOM SELLECK	1 00	x						0	0	
IRECTOR 80) JOHN C SIGLER IRECTOR	1 00	х						0	0	
81) DWIGHT D VAN HORN IRECTOR 82) ROBERT L VIDEN JR IRECTOR	1 00	X						0	0	
33) HOWARD J WALTER IRECTOR 34) JD WILLIAMS	1 00	х						0	0	
94) ID WILLIAMS IRECTOR B5) DENNIS L WILLING IRECTOR	1 00	X						0	0	
86) ROBERT J WOS IRECTOR 87) DONALD E YOUNG	1 00	X						0	0	
IRECTOR Lb Sub-Total c Total from continuation she						 >	 			
d Total (add lines 1b and 1c) Total number of individuals (\$100,000 in reportable com	ıncludıng but not lım	nted to	those	list			▶ -) who	5,579,153 received more tha	n	631,256
B Did the organization list any					y en	nplov	ee, o	r highest compensa	ated employee	Yes No
on line 1a? If "Yes," complete For any individual listed on li	Schedule J for such ne 1a, is the sum of	i <i>ndividu</i> reporta	<i>al</i> . ble c	• omp	• ensa	• ation	• and	other compensation	from the	3 No
organization and related organization									h	4 Yes
Did any person listed on line	1a receive or accru anization? <i>If</i> " <i>Yes," o</i>									5 No

4	For any individual listed on line 1a, is the sum of reportable compensation and oth organization and related organizations greater than \$150,000? If "Yes," complete individual	•	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelate services rendered to the organization? If "Yes," complete Schedule J for such person	5	5		No			
S	ection B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization							
	(A)	(B)		(C)			

Description of services

MEMBERSHIP PROC SOLICITOR

Compensation

12,397,032

INFOCISION 325 SPRINGSIDE DR AKRON, OH 44333

Name and business address

PALM COAST DATA

PALM COAST DATA 11 COMMERCE BLVD	MEMBERSHIP PROCESSING	9,978,184
PALM COAST, FL 32164		
VALTIM		
PO BOX 114 FOREST, VA 24551	FULFILLMENT CENTER	9,814,106
PM CONSULTING		
12100 WILSHIRE BLVD	CONSULTING	8,705,456
LOS ANGELES, CA 90025		
POSTMASTER		
1735 N LYNN ST	POSTAGE SHIPPING	8,408,585
ARLINGTON, VA 22209		
2 Total number of independent contractors (including but not limited to those listed above)) who received more than	
\$100,000 in compensation from the organization >29		
		Form 990 (2010)

t VI		Statement of Reven	ue				1 49	је 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
2 1	a	Federated campaigns	1 a					
5	b	Membership dues	. 1b					
	c	Fundraising events	1c					
₹	d	Related organizations	. 1d	12,573,541				
		Government grants (contributions)						
7		All other contributions, gifts, grants				!		
5	:	similar amounts not included above Noncash contributions included in l	e	58,572,260				
Ē	h '	Total. Add lines 1a-1f			71,145,801			
				Business Code				
2	а	PROGRAM FEES			6,552,336	6,552,336		
	b	MEMBER DUEC						
	C	MEMBER DUES			100,531,465	100,531,465		
	d							
	e .							
		All other program service re	wanua.					
	•	All other program service re	venue					
	g	Total. Add lines 2a-2f	<u> </u>		107,083,801			
3		Investment income (includir	·		052.454			052
		and other similar amounts)			852,154			852,
4		Income from investment of tax-ex		-	11,303,074			
5		Royalties			11,303,074			11,303,0
			(ı) Real	(II) Personal				
		Gross Rents	1,536,497					
	- ,	Less rental expenses	1,543,676					
		Rental income or (loss)	-7,179					
	d	Net rental income or (loss)			-7,179			-7,1
			(ı) Securities	(II) O ther				
7	1	Gross amount from sales of	19,870,269					
		assets other than inventory						
		Less cost or other basis and	17,262,150					
	:	sales expenses						
		Gain or (loss)	2,608,119		2.600.440			2 600
		Net gain or (loss)			2,608,119	1		2,608,
8		Gross income from fundraisi (not including	ng events					
	:	\$						
		of contributions reported on See Part IV, line 18						
		,,	a	429,695				
	Ь	Less direct expenses .	b	236,738				
	С	Net income or (loss) from fu	ndraising events 🕒		192,957			192,
			ctivities See Part IV, line 19 .	а				
				b				
		Net income or (loss) from ga						
1		Gross sales of inventory, les returns and allowances .	a a	17,943,309				
	ь	Less cost of goods sold .	. b	6,198,109				
	c	Net income or (loss) from sa	les of inventory 🕨		11,745,200	10,067,029	1,678,171	ı
		Miscellaneous Revenue		Business Code				
1	1a	ADVERTISING		541800	20,922,249	4,765	20,866,889	50,
	b	SUBSCRIPTIONS		541800	1,506,014	1,506,014		1
		NRA CAFE SALES		722210	459,089			459,
	-	All other revenue						1
				L				1
	е '	Total. Add lines 11a-11d			22 007 077			
	e '	Total. Add lines 11a-11d			22,887,352			

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501(c)(4) organizations mu			(B)	
	ll other organizations must complete column (A) but are not required to		ns (B), (C), and ((B)	(D).	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations				_
	in the U.S. See Part IV, line 21	189,000	189,000		
2	Grants and other assistance to individuals in the			1	
	U S See Part IV, line 22	30,500	30,500		
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the U.S. See				
_	Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,168,553	2,196,138	1,708,567	263,848
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	33,141,573	23,315,768	7,421,684	2,404,121
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,284,170	4,555,464	2,206,761	521,945
9	Other employee benefits	4,524,889	3,170,017	1,030,643	324,229
10	Payroll taxes	2,547,465	1,784,685	580,242	182,538
	Fees for services (non-employees)	2,517,105	1,704,003	300,242	102,330
	Management	0			
b	Legal	3,582,244	3,120,380	461,864	_
c	Accounting	117,200		117,200	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	7,989,955			7,989,955
f	Investment management fees	219,167		219,167	
g	Other	4,665,094	4,665,094		
12	Advertising and promotion	28,506,230	20,315,496		8,190,734
13	Office expenses	4,136,496	2,125,967	2,010,529	
14	Information technology	5,894,109	3,486,954	2,407,155	
15	Royalties	0			
16	Occupancy	1,952,024	992,051	959,973	
17	Travel	6,085,855	4,733,186	1,352,669	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	5,338,324	4,225,714	1,112,610	_
20	Interest	1,369,546	976,749		
21	Payments to affiliates	0	·	·	
22	Depreciation, depletion, and amortization	2,508,907	1,772,561	736,346	
23	Insurance	1,014,514	1,014,514	 	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	,	=,==,,==.		
э	MEMBER COMMUNICATIONS	57,011,926	45,243,773		11,768,153
b	PRINTING AND SHIPPING	23,975,743	23,975,743		21,700,100
	PROGRAM SERVICES	16,696,651	16,696,651		
	ADDITIONAL INSTITUTE FOR LEGISLATIVE	10,000,001	10,000,001		_
	ACTION	9,943,784	7,486,001	1,236,714	1,221,069
е	FULFILLMENT MATERIAL	6,464,184	5,814,882	116,695	532,607
f	All other expenses	4,176,172	3,143,957	519,393	512,822
25	Total functional expenses. Add lines 1 through 24f	243,534,275	185,031,245	24,591,009	33,912,021
26	Joint costs. Check here ► ☐ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				000 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments		18,396,784	2	9,373,624	
	3	Pledges and grants receivable, net			2,528,075	3	3,244,548
	4	Accounts receivable, net			49,767,997	4	52,606,967
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing esponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)					
}		Schedule L				6	
Assets	7	Notes and loans receivable, net			3,133,320	7	3,111,070
⋖	8	Inventories for sale or use			10,888,636	8	13,178,944
	9	Prepaid expenses and deferred charges			2,167,086	9	2,739,275
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	64,949,941			
	ь	Less accumulated depreciation	10b	28,228,772	36,186,545	10c	36,721,169
	11	Investments—publicly traded securities			29,042,690	11	33,133,504
	12	Investments—other securities See Part IV, line 11			3,341,890	12	4,602,761
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			4,862,341	15	5,069,338
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			160,315,364	16	163,781,200
	17	Accounts payable and accrued expenses .			59,109,001	17	59,163,137
	18	Grants payable				18	
	19	Deferred revenue			28,119,095	19	28,336,891
	20	Tax-exempt bond liabilities				20	
es S	21	Escrow or custodial account liability Complete Part IV of Schedu				21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ĘŢ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	·	•	29,340,012	23	45,335,166
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			6,171,924	25	6,795,712
	26	Total liabilities. Add lines 17 through 25			122,740,032	26	139,630,906
<u>"</u>		Organizations that follow SFAS 117, check here 🕨 🔽 and com		ines 27			
Ð		through 29, and lines 33 and 34.					
an E	27	Unrestricted net assets			11,164,773	27	-6,423,671
Balance	28	Temporarily restricted net assets			3,207,708	28	6,253,866
	29	Permanently restricted net assets		23,202,851	29	24,320,099	
Fund		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	ıd con	ıplete			
5		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	ınds			32	
Ř	33	Total net assets or fund balances			37,575,332	33	24,150,294
_	34	Total liabilities and net assets/fund balances			160,315,364	34	163,781,200

Ра	Check if Schedule O contains a response to any question in this Part XI			. [고			
_	and the second s						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		227,8	811,27		
2	Total expenses (must equal Part IX, column (A), line 25)	2		243,5	534,27		
3	Revenue less expenses Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		37,5	575,33		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2,2	297,95		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		24,:	150,29		
Pai	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII		•	୮	•		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
Ь	Were the organization's financial statements audited by an independent accountant?	[2b	Yes			
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued					
	Separate basis Consolidated basis F Both consolidated and separated basis						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b				

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OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

al revenue dervice	Attacii to Form 330. F See separate mst	i uctions.	Ziiopection
me of the organization TIONAL RIFLE ASSOCIATION OF AMERICA		Em	ployer identification number
		53-	0116130
art I Organizations Maintainin	g Donor Advised Funds or Other		
organization answered "Yes	to Form 990, Part IV, line 6.		·
	(a) Donor advised fu	unds	(b) Funds and other accounts
Total number at end of year			
Aggregate contributions to (during year	•)		
Aggregate grants from (during year)			
Aggregate value at end of year			
_	nd donor advisors in writing that the asset ubject to the organization's exclusive lega		Yised Yes No
used only for charitable purposes and r	s, donors, and donor advisors in writing tha not for the benefit of the donor or donor adv	-	er purpose
conferring impermissible private benefi			☐ Yes ☐ No
	. Complete if the organization answe		m 990, Part IV, line 7.
Preservation of land for public use Protection of natural habitat		ervation of an histo	rically importantly land area ed historic structure
Preservation of open space			
	on held a qualified conservation contribution	on in the form of a c	onservation
easement on the last day of the tax yea	ir		Hald at the Find of the Warn
Total number of conservation easemen	te	2a	Held at the End of the Year
Total acreage restricted by conservation		2b	
	a certified historic structure included in (a	,	
Number of conservation easements inc	luded in (c) acquired after 8/17/06	2d	
Number of conservation easements mo	dıfıed, transferred, released, extınguıshed,	, or terminated by t	he organization during
the taxable year 🗠			
Number of states where property subje	ct to conservation easement is located 🛌		
	olicy regarding the periodic monitoring, ins	_	f violations, and
enforcement of the conservation easen		pection, nanding o	Yes No
Staff and volunteer hours devoted to m	onitoring, inspecting and enforcing conserv	vation easements o	during the year 🟲
A mount of expenses incurred in monito	ring, inspecting, and enforcing conservation	on easements durir	ng the year ► \$
Does each conservation easement report 170(h)(4)(B)(I) and 170(h)(4)(B)(II)?	orted on line 2(d) above satisfy the require	ments of section	ΓYes ΓNα
	tion reports conservation easements in its e, the text of the footnote to the organization ervation easements		
	g Collections of Art, Historical Tr answered "Yes" to Form 990, Part I		ther Similar Assets.
art, historical treasures, or other simila	d under SFAS 116, not to report in its reve er assets held for public exhibition, educati tnote to its financial statements that desci	ion or research in fi	
	d under SFAS 116, to report in its revenue sets held for public exhibition, education, o to these items		
(i) Revenues included in Form 990, Pa	rt VIII, line 1		► \$
(ii) Assets included in Form 990, Part	x		-
If the organization received or held wor	^ ks of art, historical treasures, or other sim ed under SFAS 116 relating to these items		
Revenues included in Form 990, Part V			▶ \$
	,		line de
Assets included in Form 990, Part X			F ⊅

Par	tatti Organizations Maintaining Co	llections of Art	t, His	torical Tre	easures, or C	the	r Similar Ass	ets (ca	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne following th	at are a signific	ant u	ise of its collectio	n	
а	✓ Public exhibition		d	Loan o	r exchange prog	rams			
b	✓ Scholarly research		e	┌ Other					
с	✓ Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	un hov	w they further	the organization	1's A1	zemnt nurnose in		
-	Part XIV	onections and expla	1111 1101	w they fulther	the organization	13 67	cempt purpose m		
5	During the year, did the organization solicition assets to be sold to raise funds rather than to			•				Yes	√ No
Par	rt IV Escrow and Custodial Arrang						· ·		J* 140
	Part IV, line 9, or reported an ar					ч і	C5 (6 (6))	0,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other interme	ediary	for contributi	ons or other ass	ets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ung table	-				
							A mo	unt	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1 f			
2a	Did the organization include an amount on Fe	orm 990, Part X, lın	e 21?				Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	,							
Pa	rt V Endowment Funds. Complete								
		(a)Current Year	(b)Prior Year)Three Years Back (e) Four Y	ears Back
1a	Beginning of year balance	8,687,890		6,920,616	7,675,3	16			
b	Contributions	808,137		1,582,051	487,0	22			
c	Investment earnings or losses	549,205		750,029	-1,205,4	79			
d	Grants or scholarships					\perp			
е	Other expenditures for facilities and programs	304,201		536,900					
f	Administrative expenses	30,020		27,906	36,2	43			
g	End of year balance	9,711,011		8,687,890	6,920,6	16			
2	Provide the estimated percentage of the yea	r end balance held a	as			-	1		
а	Board designated or quasi-endowment								
ь	Permanent endowment ► 100 000 %								
c 3a	Term endowment ► Are there endowment funds not in the posse	ssion of the organiz	ation	that are held :	and administere	d for	the		
	organization by	solon of the organiz	41.011	inat are mera		u 101		Yes	No
	(i) unrelated organizations						3a(i)		Νο
	(ii) related organizations						3a(ii)	Yes	
b	If "Yes" to 3a(II), are the related organization	·				•	3b	Yes	
4	Describe in Part XIV the intended uses of th								
Pai	rt VI Investments—Land, Buildings	s, and Equipme	nt. S		· 1	10.			
	Description of investment			(a) Cost or of basis (investm			(c) Accumulated depreciation	(d) Bo	ok value
1a	Land				4,902	,450			4,902,450
b	Buildings				47,869	,332	24,400,367	2	8,828,275
с	Leasehold improvements								
d	Equipment				12,178	,159	5,574,944		2,990,444
e	Other								
Tota	II. Add lines 1a-1e <i>(Column (d) should equal Fo</i>		mn (B)), line 10(c).)			►	3	6,721,169
							Schedule D (Form 9	90) 2010

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Se	e Form 990 Part Y line	13
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Table (Calary (b) should a real form 2000 Part V and (D) for 120 Part	•	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, III		
(a) Descri		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line : Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	1,000,000	
DERIVATIVE INSTRUMENT MARKET VALUATION	5,051,972	
OTHER MISCELLANEOUS LIABILITIES	743,740	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	6 705 710	
Totali (Column (b) Should equal Form 530, Part A, COI (B) line 25)	6,795,712	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	2	227,811,279
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	243,534,27
3	Excess or (deficit) for the year Subtract line 2 from line 1	2	-15,722,996
4	Net unrealized gains (losses) on investments	4	1,005,31
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,292,646
9	Total adjustments (net) Add lines 4 - 8	9	2,297,958
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-13,425,038
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	237,358,520
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		. ,
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 830,644		
e	Add lines 2a through 2d	2e	1,835,956
3	Subtract line 2e from line 1	3	235,522,564
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b -7,711,285		
c	Add lines 4a and 4b	4c	-7,711,28
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	227,811,279
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	turn
1	Total expenses and losses per audited financial	1	250,783,558
2	statements	 	
² a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	7,279,78
3	Subtract line 2e from line 1	3	243,503,77!
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		,
· a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 30,500	1	
c	Add lines 4a and 4b	4c	30,500
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	243,534,27
Do	t XIV Supplemental Information		, ,=

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

additional information		
Ident if ier	Return Reference	Explanation
III	1a	FINANCIAL STATEMENT NOTE 1 THE VALUE OF THE NRAS FIREARMS MUSEUM COLLECTION HAS BEEN EXCLUDED FROM THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION ONLY PURCHASES OF FIREARMS AND OTHER OBJECTS, AND NOT DONATIONS, ARE RECOGNIZED IN THE STATEMENTS OF ACTIVITIES FIREARMS AND OTHER OBJECTS THAT HAVE BEEN ACCESSIONED IN THE NRA MUSEUM ARE NOT INTENDED FOR SALE OR EXCHANGE
III	4	THE NATIONAL FIREARMS MUSEUM PROMOTES GUN COLLECTING AND PRESERVATION OF HISTORY THROUGH THE HERITAGE OF FIREARMS PLEASE VISIT NRAMUSEUM ORG FOR EXCITING INFORMATION
V	4	NRA ENDOWMENT FUNDS BENEFIT NRA INSTITUTE FOR LEGISLATIVE ACTION, NATIONAL CHAMPIONSHIPS, MARKSMANSHIP, AND LAW ENFORCEMENT
x	2	MANAGEMENT EVALUATED THE NRAS TAX POSITIONS AND CONCLUDED THAT THE NRA HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE WITH FEW EXCEPTIONS, THE NRA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE US FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2007, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOKBACK PERIOD
XI	8	INCLUDES AGENCY TRANSACTIONS, UNREALIZED GAIN ON DERIVATIVE INSTRUMENT, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN
XII	2 d	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT
XII	4 b	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND INTEREST ON ENDOWMENT GRANTS
XIII	2 d	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN
XIII	4 b	INCLUDES INTEREST ON ENDOWMENT GRANTS

SCHEDULE F

Department of the Treasury

(Form 990)

As Filed Data -

DLN: 93493270005081

OMB No 1545-0047

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public

Internal	Revenue Service						Inspect ion
	e of the organizatio					Employer identi	fication number
NAT	IONAL RIFLE ASS	OCIATION O	FAMERICA			53-0116130	
Do.	rt I General	Informatio	n on Activiti	ios Outsido t	ha Unitad States C	omplete if the organiza	ation answored
Ра			rt IV, line 14b		nie officed States. C	omplete if the organiza	ation answered
1	_		_			amount of the grants o	
		-	-	_		ion criteria used to awa	rd
	the grants or as	sistance?					│ Yes │ No
2	For grant makers. United States	Describe in Pa	rt V the organiz	zation's procedu	res for monitoring the us	e of grant funds outside th	е
3	Activites per Reg	ion (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region		(b) Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Central America	and the			INVESTMENTS		4,000,000
	Carıbbean						.,,.
	Central America	and the			PROGRAM SERVICES	LAW ENFORCE	25,000
	Carıbbean					TRAINING	
				-			
2-	Sub-total						4 025 000

b Total from continuation sheets

c Totals (add lines 3a and 3b)

to Part I

4,025,000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nu	imber of recipient	organizations lis	sted above that are i	recognized as charit	cies by the foreign c	ountry, recognized	as	
3	· .		_	tities				•	

her Assistance	to Individuals	Outside the Unit	ted States. Complete	ıf the organızatıon aı	nswered "Yes" to Form 9	Pag 990, Part IV, line
ditional space is r	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book, FMV, appraisal, othe
	ditional space is r	ditional space is needed. (b) Region (c) Number of	ditional space is needed. (b) Region (c) Number of (d) A mount of	ditional space is needed. (b) Region (c) Number of (d) A mount of (e) Manner of cash	ditional space is needed. (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of recipients cash grant disbursement non-cash	(b) Region (c) Number of recipients (d) A mount of cash grant (e) Manner of cash disbursement (f) A mount of non-cash (g) Description of non-cash

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> ~</u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	~	Νο
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	굣	Yes	Γ	Νο
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Γ	Yes	굣	Νο
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	굣	Νο

Schedule F (Form 990) 2010

Complete this part	Supplemental Information Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional								
information.									
Identifier	ReturnReference	Explanation							

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493270005081

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

Part I	Fundraising Activities.	Complete if the organization answered	d "Yes" to Form 990, Part IV, line 17.

Indicate whether the organization raised funds through any of the following activities. Check all that apply

- **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
INFOCISION	PAID SOLICITOR		No	12,739,255	7,687,860	5,051,395
STRATEGIC FUNDRAISING	PAID SOLICITOR		Νο	450,077	302,095	147,982
Total			13,189,332	7,989,955	5,199,377	

³ List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

KY, NY, PA, UT, VA

Pa	rt II		Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.						
			(a) Event #1 ILA CHARLOTTE (event type)	(b) Event #2	(c) O ther Events	(d) Total Events (Add col (a) through col (c))			
4		_	429,69		(total number)	429,695			
Revenue	1 2	Gross receipts Less Charitable	429,09			429,093			
2		contributions							
	3	Gross income (line 1 minus line 2)	429,69	5		429,695			
	4	Cash prizes							
မှာ	5	Non-cash prizes							
Expenses	6	Rent/facility costs							
ă	7	Food and beverages							
Direct	8	Entertainment							
ā	9	Other direct expenses .	236,73	3		236,738			
	10	Direct expense summary Add lin	es 4 through 9 ın columr	ı(d)	🛌	236,738			
	11	Net income summary Combine li	nes 3 and 10 ın column (d)		192,957			
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than			
<u>Ф</u>		\$13,000 ON FORM 550 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) Total gaming			
Revenue				bingo/progressive bingo		(Add col (a) through col (c))			
	1	Gross revenue							
မွာ	2	Cash prizes							
Expenses	3	Non-cash prizes							
	4	Rent/facility costs							
Direct	5	Other direct expenses							
	6	Volunteer labor	┌ Yes % ┌ No	┌ Yes % ┌ No	┌ Yes %				
	7	Direct expense summary Add line	s 2 through 5 in column ((d)					
	8	Net gaming income summary Com	ibine lines 1 and 7 in col	umn (d)					
9		er the state(s) in which the organiza							
a		he organization licensed to operate		h of these states?		· · Fyes Fno			
b	If"N	No," Explain							
10a b		e any of the organization's gaming /es," Explain			the tax year?	· · Yes No			
_	•	· · ·							

L 1	Does the organization operate ga	aming activities with nonmembers? .		. Г _{Yes} Г _{No}
L 2	Is the organization a grantor, be	neficiary or trustee of a trust or a men	ber of a partnership or other entity	
	formed to administer charitable (gaming?		. Г _{Yes} Г _{No}
.3	Indicate the percentage of gamii	ng activity operated in		
а	The organization's facility		13a	
b	An outside facility		13b	
L 4	Provide the name and address or records	f the person who prepares the organiza	ition's gaming/special events books and	
	Name 🟲			
	Address 🟲			
.5a		ntract with a third party from whom the		
				· Fyes FNo
b		ming revenue received by the organiza ned by the third party 🟲 \$	tion 🟲 \$ and the	
c	If "Yes," enter name and address			
	Name 🟲			
	Address 🏲			
6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation l	* \$		
	Description of services provided	▶		
	Director/officer	□ Employee	Independent contractor	
7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	· ·			┌ _{Yes} ┌ _{No}
b			o other exempt organizations or spent	
		activities during the tax year > \$		
Par	Complete this part to justructions.)	provide additional information for	responses to question on Schedule G	(see
	Identifier	ReturnReference	Explanation	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493270005081

OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV. line 21 or 22. ► Attach to Form 990

Inspect ion

Employer identification number Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be (c) IRC Code section (d) A mount of cash 1 (a) Name and address of **(b)** EIN (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant organization ıf applıcable arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) (1) LAW ENFORCEMENT 54-1798397 501c4 180,000 LAW ENFORCEMENT ALLIANCE7700 LEESBURG OIKE FALLS CHURCH, VA 22043 (2) NATIONAL FDN FOR 52-1480785 501c3 9,000 SCHOLARSHIPS WOMEN LEGISLATORS910 16TH ST NW WASHINGTON, DC 20006

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNDERGRADUATE SCHOLARSHIPS	19	30,500			

Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.							
Ident if ier	Return Reference	Explanation						
I		NRA-ILA PROVIDES GRANT SUPPORT TO LEAA EDUCATION AND TRAINING INITIATIVES, AND NRA ACTIVELY ASSISTS NATIONAL FOUNDATION OF WOMEN LEGISLATORS IN THE SELECTION AND ADMINISTRATION OF NFWL SCHOLARSHIPS						

DLN: 93493270005081

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ▶ Attach to Form 990. ▶ See separate instructions. Open to Public Inspection

lame	of	t he	orgar	nizat ior	1		
ATION	ΑL	RIFLE	ASSO	CIATION	OF	AMERIC	Α

Employer identification number

53-0116130

Pa	art I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these item.			
	First-class or charter travel Housing allowance or residence for personal us	e		
	☐ Travel for companions ☐ Payments for business use of personal resident	ce		
	▼ Tax idemnification and gross-up payments ▼ Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation commit	:tee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing org or a related organization	anızatıon		
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	? 4a		Νo
Ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
Ь	Any related organization?	6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulat section 53 4958-6(c)?	tions 9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) WAYNE LAPIERRE	(I) (II)	674,117	132,008	29,344	92,913	41,918	970,300	
(2) CHRIS W COX	(ı) (ıı)	478,033	91,560	18,819	41,891	35,825	666,128	
(3) WILSON H PHILLIPS JR	(ı) (ıı)	401,384	92,156	25,798	103,460	26,747	649,545	
(4) KAYNE B ROBINSON	(ı) (ıı)	418,893	88,595	519,729	18,130	33,838	1,079,185	175,170
(5) EDWARD J LAND JR	(ı) (ıı)	358,117	44,819	9,591	18,130	31,705	462,362	
(6) TYLER SCHROPP	(ı) (ıı)	359,289	75,000	8,187	14,700	45,120	502,296	
(7) MARY CORRIGAN	(ı) (ıı)	324,416		4,752	28,868	5,961	363,997	
(8) JOSEPH GRAHAM	(ı) (ıı)	229,116	100,000	23,358	18,130	26,135	396,739	
(9) MICHAEL MARCELLIN	(ı) (ıı)	149,680	176,546	18,876	18,130	33,628	396,860	
(10) RO BERT MARCARIO	(ı) (ıı)	218,290	29,242	3,225	14,011	34,064	298,832	
(11) DAVID BUTZ	(ı) (ıı)	151,033					151,033	
(12) MARION P HAMMER	(ı) (ıı)	140,000	50,000				190,000	
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
I	1a	CHARTER TRAVEL WAS USED ON OCCASIONS INVOLVING MULTIPLE EVENTS WHEN REDUCED AIRLINE SCHEDULES PRECLUDED OTHER OPTIONS THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	1a	CERTAIN COMPENSATION ELEMENTS WERE GROSSED UP ALL TAX GROSS-UPS WERE PROPERLY INCLUDED IN TAXABLE COMPENSATION
I	1a	CLUBS, SUCH AS SAFARI CLUB AND LUNCHEON CLUB, ARE USED FOR BUSINESS PURPOSES THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	4 b	THE 457F SERVICE COST INCLUDED IN DEFERRED COMPENSATION FOR WAYNE LAPIERRE WAS 74,783, FOR CHRIS W COX 23,761, FOR WILSON H PHILLIPS JR 85,330, AND FOR MARY CORRIGAN 10,738 THE NRA DECIDES THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING FOR EACH PARTICIPANT THE 457F PLAN IS ALSO DESIGNED TO SUPPLEMENT THE CURRENT DEFINED BENEFIT PLAN WHERE CURRENT BENEFIT LAW CAUSES LOW REPLACEMENT RATIOS FOR SOME PARTICIPANTS
II		COLUMN E READER NOTE TOTAL COMPENSATION IN SCHEDULE J PART II COLUMN E SHOULD NOT BE EXPECTED TO TIE TO 990 PART VII COMPENSATION TOTALS PER EMPLOYEE DUE TO DIFFERENT DEFINITIONS AND EXCLUSIONS
II		COLUMN BIII OTHER REPORTABLE COMPENSATION IN TAXABLE WAGES INCLUDES 457B, AUTO AND LIFE BENEFITS IN ADDITION, FOR KAYNE ROBINSON IT INCLUDES VESTING AND ONE-TIME DISTRIBUTION OF DEFERRED COMPENSATION AS REQUIRED BY REGULATIONS
II		COLUMN C INCLUDES THE EMPLOYER-PAID PORTIONS OF THE NRA DEFINED BENEFIT PLAN, 401K PLAN, AND 457F PLAN

Schedule J (Form 990) 2010

As Filed Data -

DLN: 93493270005081

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010

Open to Public Inspection

Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERIC	:A						E	mployer i	dentifica	ation numb	er
							5	3-01161	30		
Part I Excess Benefit Trai	ısacti	i ons (s	ection 501	(c)(3) a	and section 501	(c)(4)	organi	zations	only).		
Complete if the organizat										ıne 40b	
				<u> </u>							orrected?
1 (a) Name of disqualified per			on (b) Descrip		ription	iption of transaction				No	
										Yes	- 110
				<u> </u>						I	
2 Enter the amount of tax impos	ed on t	he orgai						ear unde	r		
section 4958								· · •	* * —		
3 Enter the amount of tax, if any	, on lin	e 2, abo	ve, reimburs	ed by th	e organization .			•	· \$		
Part II Loans to and/or I						_					
Complete if the organiz	zation a T	ans we re	d "Yes" on F T	orm 990), Part IV, line 26	, or Forr I	n 990-l		, line 38	3 a	
	(b) Loan to)			(-)	(f)			(XX/++	
(a) Name of interested person and	or fro	om the	the (c) O riginal			(e) I defau				(g)Written agreement?	
purpose	organi	zation?	principal a	amount	(d)Balance due	ueiaa		commit		agreeme	
	То	From	1			Yes	No	Yes	No	Yes	No
	 	110111				103	110	1.03	+ 110	103	110
			<u> </u>					+			+
	<u> </u>		-					+			
Total				▶ \$							
Part IIII Grants or Assistar	ice Be	enefitt	ing Inter	ested	Persons.					•	
Complete if the orga	nızatı	on ansv	wered "Yes	" on Fo	rm 990, Part IV	I, line 2	27.				
					en interested per						
(a) Name of interested pers	on	`			ganızatıon .		(c) A n	nount of g	rant or ty	ype of assı	stance
					_						

Part IV Business Transactions Involving Interested Persons.

Complete if the organization	n answered "Yes" on	Form 990, Part IV, III	ne 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) MARION HAMMER	DIRECTOR	190,000	CONSULTING		Νο
(2) DAVID BUTZ	DIRECTOR	151,033	CONSULTING		Νo

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

As Filed Data -

DLN: 93493270005081

OMB No 1545-0047

2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

Identifier	Return Reference	Explanation
Form 990 Part I	7	READER NOTE THE 990 COVER PAGE SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND NEGATIVE UNRELATED BUSINESS TAXABLE INCOME ON LINE 7B BECAUSE RELATED EXPENSES EXCEEDED REVENUE IN THE YEAR 2010 FOR UNRELATED BUSINESS ACTIVITIES

ldentifier	Return Reference	Explanation
Form 990 Part VI	6	NRA IS A MEMBERSHIP ASSOCIATION

ldentifier	Return Reference	Explanation
Form 990 Part VI	7a	NRA MEMBERS ELECT ALL 76 MEMBERS OF THE NRA BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
Form 990 Part VI		CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL PER BY LAWS AND NEW YORK NOT FOR PROFIT CORPORATE LAW

ldentifier	Return Reference	Explanation
Form 990 Part VI		FORM 990 IS REVIEWED BY EXTERNAL AUDITING FIRM AND THE NRA BOARD AUDIT COMMITTEE BEFORE IT IS FILED WITH THE IRS

ldentifier	Return Reference	Explanation
Form 990 Part VI	19	NRA BY LAWS AND CONSOLIDATED ANNUAL FINANCIAL STATEMENTS ARE MAILED UPON REQUEST NRA DOES NOT MAKE INTERNAL OPERATING POLICIES AVAILABLE TO THE GENERAL PUBLIC

ldentifier	Return Reference	Explanation
Form 990 Part VI	12c	ANNUAL FILINGS BY ALL BOARD MEMBERS ARE REVIEWED BY THE NRA AUDIT COMMITTEE

ldentifier	Return Reference	Explanation
Form 990 Part VI	15a,15b	COMPENSATION IS REVIEWED BY BOARD COMPENSATION COMMITTEE AND INDEPENDENT COMPENSATION AND BENEFITS CONSULTING FIRM INCLUDING BENCHMARKING AND INDUSTRY BEST PRACTICES

ldentifier	Return Reference	Explanation
Form 990 Part VII		OFFICERS OF THE NRA ALSO SPEND TIME SERVING ON BOARDS OF THE NRA CHARITABLE AFFILIATES AS DISCLOSED IN THE FOLLOWING LIST NRA PRESIDENT RON SCHMEITS SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FOUNDATION AND NRA SPECIAL CONTRIBUTION FUND NRA 1ST VICE PRESIDENT JIM PORTER SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FOUNDATION, NRA SPECIAL CONTRIBUTION FUND, AND NRA CIVIL RIGHTS DEFENSE FUND WAYNE LAPIERRE SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FREEDOM ACTION FOUNDATION WILSON H PHILLIPS JR SPENDS 1 ADDITIONAL HOUR PER WEEK ON EACH OF NRA FOUNDATION, NRA SPECIAL CONTRIBUTION FUND, NRA CIVIL RIGHTS DEFENSE FUND, AND NRA FREEDOM ACTION FOUNDATION KAYNE ROBINSON SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA SPECIAL CONTRIBUTION FUND

ldentifier	Return Reference	Explanation
Form 990 Part VII		OTHER MEMBERS OF THE NRA BOARD ALSO SPEND TIME ON BOARDS OF CHARITABLE AFFILIATES AS FOLLOWS, AT APPROXIMATELY 1 ADDITIONAL HOUR PER WEEK PER ENTITY JOE ALLBAUGH ON NRA FOUNDATION THOMAS ARVAS ON NRA SPECIAL CONTRIBUTION FUND BILL BACHENBERG ON NRA FOUNDATION CAROL BAMBERY ON NRA CIVIL RIGHTS DEFENSE FUND DAVID BENNETT ON NRA SPECIAL CONTRIBUTION FUND BILL CARTER ON NRA SPECIAL CONTRIBUTION FUND ALLAN CORS ON NRA FOUNDATION CHARLES COTTON ON NRA CIVIL RIGHTS DEFENSE FUND JOHN CUSHMAN ON NRA SPECIAL CONTRIBUTION FUND BILL DAILEY ON NRA SPECIAL CONTRIBUTION FUND AND NRA CIVIL RIGHTS DEFENSE FUND SANDY FROMAN ON NRA FOUNDATION BUZ MILLS ON NRA FOUNDATION CLETA MITCHELL ON NRA FREEDOM ACTION FOUNDATION BOB SANDERS ON NRA CIVIL RIGHTS DEFENSE FUND JOHN SIGLER ON NRA SPECIAL CONTRIBUTION FUND AND NRA FOUNDATION

ldentifier	Return Reference	Explanation
Form 990 Part VII		CONTINUED FROM ABOVE BOB VIDEN ON NRA SPECIAL CONTRIBUTION FUND HAROLD VOLKMER ON NRA CIVIL RIGHTS DEFENSE FUND

Identifier	Return Reference	Explanation
Form 990 Part VII		READER NOTE 990 PART VII SECTION B TOTAL COMPENSATION TO INDEPENDENT CONTRACTOR INFOCISION SHOULD NOT BE EXPECTED TO TIE TO SCHEDULE G DISCLOSURE OF COMPENSATION TO INFOCISION AS A PAID FUND RAISING SOLICITOR, BECAUSE 990 PART VII SECTION B REPORTS TOTAL COMPENSATION FOR ALL WORK INCLUDING BOTH MEMBERSHIP PROCESSING AND SOLICITATION OF CONTRIBUTIONS, WHEREAS SCHEDULE G DISCLOSES VENDOR COMPENSATION SPECIFICALLY FOR SOLICITATION OF CONTRIBUTIONS

ldentifier	Return Reference	Explanation
Form 990 Part X		READER NOTE REGARDING THE NRA BALANCE SHEET DEFERRED COSTS AND DEFERRED REVENUES RELATED TO MEMBERSHIP ACQUISITION AND RENEWAL ARE ACCOUNTING ENTRIES REQUIRED UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES DEFERRED REVENUE FOR DUES IS NOT A LIABILITY, AS IT RECOGNIZES REVENUE TO BE COLLECTED IN FUTURE AND MATCHED WITH FUTURE SERVICES PROVIDED TO NRA MEMBERS DUES REVENUE IS RECOGNIZED OVER THE LIFE OF THE MEMBERSHIP

ldentifier	Return Reference	Explanation
Form 990 Part III	4e	OTHER PROGRAM SERVICES INCLUDE MEMBERSHIP SERVICES, PUBLIC AFFAIRS, ANNUAL MEETING AND MEMBERS EXHIBIT HALL, EXECUTIVE, ADVANCEMENT, AND ADMIN PROGRAM EXPENSES

ldentifier	Return Reference	Explanation
Form 990 Part XI	5	RECONCILIATION INCLUDES ADJUSTMENT FOR AGENCY TRANSACTIONS, UNREALIZED GAINSLOSSES ON INVESTMENTS AND DERIVATIVE INSTRUMENT, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN

DLN: 93493270005081

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

nternal Revenue Service									Ins	pectior	
Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERICA							E	mployer ident	ification number		_
ANTONAL KILL ASSOCIATION OF AMERICA							5	3-0116130			
Part I Identification of Disregarded Entities (Com	plete	ıf the organızatıc	n.	answered "Yes'	" on	Form 990, Part	IV, I	ine 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year asse		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during			ıft	the organization	n an	nswered "Yes" or	n Fori	n 990, Part	IV, line 34 because	e it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) Legal domicile (state or foreign country)		Exe	(d) Exempt Code section		(e) chanty status ion 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(controlled organization	
(1) NRA FOUNDATION INC			\vdash							Yes	No
11250 WAPLES MILL RD FAIRFAX, VA 22030 52-1710886	CHAR	ITABLE	DC			501c3		LINE 7	NRA	Yes	
(2) NRA SPECIAL CONTRIBUTION FUND											
PO BOX 700 RATON, NM 87740 23-7367534	CHAR	ITABLE		NM		501c3		LINE 11-TYPE I	NRA	Yes	
(3) NRA CIVIL RIGHTS DEFENSE FUND 11250 WAPLES MILL RD	CHAR:	ITABLE		VA		501c3		LINE 7	NRA	Yes	
FAIRFAX, VA 22030 52-1136665											
(4) NRA FREEDOM ACTION FOUNDATION 11250 WAPLES MILL RD		ITABLE		VA		501c3	LINE 7		NRA	Yes	
FAIRFAX, VA 22030 26-1277941			_								
	_		\vdash								
	1		1		1				1	1	

				ble as a Partner s reated as a partne					answe	ered "Y	es" on Fo	rm 990,	Part :	IV, lır	ne 34
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Share of to	(f) Share of total income		(g) f end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 Schedule K-1 (Form 1065)		(j Gener mana partr	al or ging	(k) Percentage ownership
									Yes	No			Yes	No	
				ble as a Corpora ations treated as a							nswered "Y	'es" on	Form	990,	Part IV,
	(a) d EIN of related organiza		(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlling T		(e) Type of er (C corp, S or trust	of entity Share o		of total income Sha end-		(g) are of -of-year ssets		(h) Percentage ownership
											_				

(6) NRA CIVIL RIGHTS DEFENSE FUND

Pa	art V Transactions With Related Organizations (Complete if the organization answe	ered "Yes" on Form 99	00, Part IV, line 34, 35	5, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No
1 0	During the tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations listed	ın Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			[3	1a	Yes	
b	Gift, grant, or capital contribution to other organization(s)			[1	1b		No
c	Gift, grant, or capital contribution from other organization(s)			[1	1c	Yes	
d	Loans or loan guarantees to or for other organization(s)			[1	1d		No
е	Loans or loan guarantees by other organization(s)			[1e		No
f	Sale of assets to other organization(s)			[3	1f		No
g	Purchase of assets from other organization(s)			[1	1g		No
h	Exchange of assets			[1	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)			[:	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)			[:	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)			[1	1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)			[:	11		No
n	n Sharing of facilities, equipment, mailing lists, or other assets			[1	1m		No
n	Sharing of paid employees			1	1n	Yes	
o	Reimbursement paid to other organization for expenses			[10		No
р	Reimbursement paid by other organization for expenses			[1p	Yes	
q	Other transfer of cash or property to other organization(s)			[3	1q		No
r	O ther transfer of cash or property from other organization(s)			[:	1r		No
		10					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including covere	d relationships and trans	saction thresholds			
		(b)					
			Amount involved		amo	ount inv	olved
(1)	NRA FOUNDATION INC		12,573,541	ACTUAL COST			
(2) [NRA FOUNDATION INC	n	4,126,180	ACTUAL COST			
1 (E)	NRA FOUNDATION INC	р	5,066,935	ACTUAL COST			
(4) [NRA SPECIAL CONTRIBUTION FUND	a	120,000	ACTUAL COST			
(5) [NRA SPECIAL CONTRIBUTION FUND	р	328,252	ACTUAL COST			

ACTUAL COST

59,825

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Dispropitionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	man part	(h) neral or anaging artner?	
			Yes	No		Yes	No		Yes	No	
			-							+	
										+	
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010

Software ID: 10000149

Software Version: 2010.2.15

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	NRA FOUNDATION INC	С	12,573,541	ACTUAL COST
(2)	NRA FOUNDATION INC	n	4,126,180	ACTUAL COST
(3)	NRA FOUNDATION INC	р	5,066,935	ACTUAL COST
(4)	NRA SPECIAL CONTRIBUTION FUND	а	120,000	ACTUAL COST
(5)	NRA SPECIAL CONTRIBUTION FUND	р	328,252	ACTUAL COST
(6)	NRA CIVIL RIGHTS DEFENSE FUND	p	59,825	ACTUAL COST

Software ID: 10000149 **Software Version:** 2010.2.15

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) (C) Average Position (check all hours that apply) per I I I m T I							(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
WAYNE LAPIERRE EXEC VP	57 00			х				835,469	0	125,615		
CHRIS W COX	57 00			Х				588,412	0	70,796		
EXEC DIR, ILA WILSON H PHILLIPS JR								·		·		
TREASURER	52 00			Х				519,338	0	124,168		
KAYNE B ROBINSON EXEC DIR, GENERAL OPERATIONS	50 00			х				1,027,217	0	45,056		
EDWARD J LAND JR SECRETARY	50 00			х				412,527	0	45,832		
RONALD L SCHMEITS PRESIDENT	20 00	Х		х				0	0	0		
DAVID A KEENE 1ST VICE PRESIDENT	20 00	х		х				0	0	0		
JAMES W PORTER II 2ND VICE PRESIDENT	20 00	Х		х				0	0	0		
TYLER SCHROPP EXEC DIRECTOR, ADVANCEMENT	52 00					Х		442,476	0	54,463		
MARY CORRIGAN CHIEF OF STAFF	40 00					х		329,168	0	30,373		
JOSEPH GRAHAM DIRECTOR, PUBLICATIONS	40 00					х		352,474	0	40,832		
MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					х		345,102	0	49,348		
ROBERT MARCARIO DIRECTOR, MEMBERSHIP	40 00					Х		250,757	0	44,773		
JOE M ALLBAUGH DIRECTOR	1 00	Х						0	0	0		
WILLIAM H ALLEN DIRECTOR	1 00	Х						0	0	0		
THOMAS PARVAS DIRECTOR	1 00	Х						0	0	0		
SCOTT L BACH DIRECTOR	1 00	Х						0	0	0		
WILLIAM A BACHENBERG DIRECTOR	1 00	Х						0	0	0		
FE BACHHUBER JR DIRECTOR	1 00	Х						0	0	0		
M CAROL BAMBERRY DIRECTOR	1 00	Х						0	0	0		
BOB BARR DIRECTOR	1 00	Х						0	0	0		
RONNIE G BARRETT DIRECTOR	1 00	Х						0	0	0		
CLEL BAUDLER DIRECTOR	1 00	Х						0	0	0		
DAVID E BENNETT III DIRECTOR	1 00	Х						0	0	0		
J KENNETH BLACKWELL DIRECTOR	1 00	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per		((tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
MATT BLUNT	1 00	Х						0	0	0		
DIRECTOR DAN BOREN	1.00	.,						0	0			
DIRECTOR	1 00	Х						0	0	0		
ROBERT K BROWN DIRECTOR	1 00	Х						0	0	0		
PETE BROWNELL DIRECTOR	1 00	Х						0	0	0		
JOHN P BURTT DIRECTOR	1 00	Х						0	0	0		
DAVID BUTZ DIRECTOR	1 00	Х						151,033	0	0		
J WILLIAM CARTER DIRECTOR	1 00	Х						0	0	0		
RICHARD CHILDRESS DIRECTOR	1 00	Х						0	0	0		
PATRICIA A CLARK DIRECTOR	1 00	Х						0	0	0		
ALLAN D CORS DIRECTOR	1 00	Х						0	0	0		
CHARLES L COTTON DIRECTOR	1 00	Х						0	0	0		
DAVID G COY DIRECTOR	1 00	Х						0	0	0		
LARRY E CRAIG DIRECTOR	1 00	Х						0	0	0		
JOHN L CUSHMAN DIRECTOR	1 00	Х						0	0	0		
WILLIAM H DAILEY DIRECTOR	1 00	Х						0	0	0		
JOSEPH P DEBERGALIS JR DIRECTOR	1 00	Х						0	0	0		
DONN C DIBIASIO DIRECTOR	1 00	Х						0	0	0		
MANUEL FERNANDEZ DIRECTOR	1 00	Х						0	0	0		
EDIE P FLEEMAN DIRECTOR	1 00	Х						0	0	0		
JOEL FRIEDMAN DIRECTOR	1 00	Х						0	0	0		
SANDRA S FROMAN DIRECTOR	1 00	Х						45,180	0	0		
TOM GAINES DIRECTOR	1 00	х						0	0	0		
JAMES S GILMORE III DIRECTOR	1 00	Х						0	0	0		
MARION P HAMMER DIRECTOR	1 00	Х						190,000	0	0		
GRAHAM HILL DIRECTOR	1 00	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per	rage Position (check all urs that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
STEVE HORNADY DIRECTOR	1 00	х						0	0	0		
SUSAN HOWARD DIRECTOR	1 00	х						0	0	0		
ROY INNIS DIRECTOR	1 00	×						0	0	0		
H JOAQUIN JACKSON DIRECTOR	1 00	х						0	0	0		
CURTIS S JENKINS DIRECTOR	1 00	×						0	0	0		
D CYNTHIA JULIEN DIRECTOR	1 00	×						0	0	0		
TOM KING DIRECTOR	1 00	×						0	0	0		
HERBERT A LANFORD JR DIRECTOR	1 00	х						0	0	0		
KARLA MALONE DIRECTOR	1 00	х						0	0	0		
CAROLYN D MEADOWS DIRECTOR	1 00	Х		***				0	0	0		
JOHN F MILIUS DIRECTOR	1 00	х						0	0	0		
BILL MILLER DIRECTOR	1 00	Х						0	0	0		
OWEN P MILLS DIRECTOR	1 00	Х						0	0	0		
CLETA MITCHELL DIRECTOR	1 00	Х						0	0	0		
GROVER G NORQUIST DIRECTOR	1 00	х						0	0	0		
OLIVER L NORTH DIRECTOR	1 00	х						0	0	0		
JOHNNY NUGENT DIRECTOR	1 00	Х						0	0	0		
TED NUGENT DIRECTOR	1 00	×						0	0	0		
LANCE OLSEN DIRECTOR	1 00	х						90,000	0	0		
TIMOTHY W PAWOL DIRECTOR	1 00	Х						0	0	0		
PETER J PRINTZ DIRECTOR	1 00	х						0	0	0		
TODD J RATHNER DIRECTOR	1 00	×						0	0	0		
WAYNE ANTHONY ROSS DIRECTOR	1 00	х						0	0	0		
CARL T ROWAN JR DIRECTOR	1 00	Х						0	0	0		
DON SABA DIRECTOR	1 00	×						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours		(C tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Forner	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
ROBERT E SANDERS DIRECTOR	1 00	Х						0	0	0		
STEVEN C SCHREINER DIRECTOR	1 00	X						0	0	0		
HAROLD W SCHROEDER DIRECTOR	1 00	Х						0	0	0		
TOM SELLECK DIRECTOR	1 00	X						0	0	0		
JOHN C SIGLER DIRECTOR	1 00	Х						0	0	0		
DWIGHT D VAN HORN DIRECTOR	1 00	Х						0	0	0		
ROBERT L VIDEN JR DIRECTOR	1 00	Х						0	0	0		
HOWARD J WALTER DIRECTOR	1 00	X						0	0	0		
JD WILLIAMS DIRECTOR	1 00	Х						0	0	0		
DENNIS L WILLING DIRECTOR	1 00	Х						0	0	0		
ROBERT J WOS DIRECTOR	1 00	Х						0	0	0		
DONALD E YOUNG DIRECTOR	1 00	Х						0	0	0		